Complete and send t	his form, to	ogether wit	i ρlicable f	ee(s), to: <u>N</u> or <u>]</u>	F	Mail Stop ISSUA Commissioner fo C.O. Box 1450 Mexandria, Virg 571) 273-2885	or Patents	3-1450			
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APPLICATION NO.	FILING	DATE		FIRST NAME	) INVENTO	OR .	ATTORNEY	DOCKET NO.	CONFIRM	ATION NO.	
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Please check the appropriate	assignee categ	gory or categor	ries (will not be pr	inted on the p	atent):	☐ Individual ☐ C	orporation or	other private gr	oup entity	Government	
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